

HABILITATION, COMMUNICATION

Service Description

HP16-00

Services provide a variety of interventions designed to maximize the functioning of persons with developmental disabilities. Services may include, but are not limited to: habilitative therapies, special developmental skills, behavior intervention and sensorimotor development.

This service provides a variety of interventions designed to maximize the functioning of Division memberseconsumers in need of communication assistance based on habilitation ~~objectives~~/outcomes designed by the planning team [e.g., Individual Support Plan (“ISP”) team]. Interventions may include activities typically delivered by the service of Hourly Hhabilitation; Ssupport, but are not limited to those activities. The emphasis is to provide communication development of teaching strategies by an individual trained in sign language, picture exchange program, assistive technology and/or augmentative communication systems, and to assist caregivers to acquire skills to improve the memberseconsumer's communication.

Service Requirements and Limitations

1. This service may be provided in the following settings:
 - 1.1 The memberseconsumer's home, or
 - 1.2 The memberseconsumer's community.
2. This service shall not be provided while the memberseconsumer is attending day treatment and training.
3. This service shall not be provided when the memberseconsumer is hospitalized.
4. This service shall not be provided to memberseconsumers living in group homes, developmental homes, skilled nursing facilities, Intermediate Care Facilities (“ICFs”)/MR, or Level I or Level II behavioral health facilities.
5. This service does not include services that are governed by a certification or licensure board.
6. This service shall not be provided to memberseconsumers younger than zero (0) to three (3) years of age.
7. At least one (1) direct observation for each new direct service staff shall be made by the Qualified Vendor within the first ninety (90) days of their hire start date when the direct service staff is present.

Service Goals and Objectives

Service Goals

1. To facilitate the removal of barriers related to social interaction and independent functioning through increasing communication.
2. To enable the ~~member~~consumer to acquire knowledge and skills and be a valued member of his/her community based on his/her own choices.

Service Objectives

The Qualified Vendor shall ensure that the following objectives/~~outcomes~~ are met:

~~1. Review assessments of the consumer's communication strengths and needs concentrating on the concerns identified by the ISP.~~

~~12. In accordance with the member's planning document (e.g., ISP) processes, assist in developing an individualized communication support plan that recognizes the consumer's communication needs, including:~~

~~1.1 2.1 Establish individualized, time-limited training objectives/functional outcomes that are based on assessment data and input from the member and the member's representatives which to allow the member to achieve his/her long-term vision for the future and priorities.~~

~~2.2 Based upon identified needs in the ISP, consult with other team professionals regarding communication needs.~~

~~1.2 2.3 Develop A specific teaching strategies for each habilitation objectives/outcomes within ten (10) business days following the initiation of service for a new or a continuing placement and whenever a new outcome has been identified for the member. The specific teaching training strategy for each objective/outcome shall identify the schedule for implementation, frequency of services, data collection methods, and the steps to be followed to teach the new skill teaching strategies. Strategies shall include activities that are more repetitive, mechanical, or routine.~~

~~1.3 Communication techniques and skills, implementation of strategies proven to be effective for the member, and establishing and strengthening caregivers' skills.~~

~~1.4 2.4 Based upon the presence or absence of measurable progress, make C changes to specific training objective/outcome(s) and/or strategies, as agreed upon by the member's planning ISP team, based on the presence or absence of measurable progress by the member.~~

~~23. Based upon identified needs in the planning document, consult with other team professionals regarding communication needs.~~

~~The plan for this service includes:~~

- ~~3.1—Criteria for reassessment;~~
- ~~3.2—Criteria for fading as appropriate; and~~
- ~~3.3—The development of communication techniques and skills; implementation of strategies proven to be effective for the consumer; and establishing and strengthening caregivers' skills.~~
- ~~4.—At least one (1) direct observation for each new direct care staff is made by the Qualified Vendor within the first 90 (ninety) days of their hire date when the direct care staff is present.~~
- 35. Each direct care staff implements the planning documentISP and applicable behavioral plan for the memberconsumer and follows the protocols for responding to~~handling~~ and reporting incidents to the Division.
- 46. As identified in the memberconsumer's planning documentISP, provide training and/or assistance to the memberconsumer's family and caregivers that is based on the priorities and needs as established to increase and/or maintain targeted communication skill acquisition of the memberconsumer.
 - 46.1 With input from the memberconsumer and family/caregivers, develop strategies for habilitation ~~objectives~~/outcomes that can be carried out in context of the memberconsumer's daily routine.
 - 46.2 Communicate with the family/caregivers regarding how the support plans are working when the worker is not present.
 - 46.3 Based upon the presence or absence of measurable progress, consult with appropriate professionals on the team to make changes to ~~training objective~~/outcome(s) and/or strategies, as agreed upon by the planning ~~ISP~~ team.

Service Utilization Information

- 1. The planningISP team shall decide, prior to the delivery of services, how service delivery will be monitored.
- 2. Typical utilizationsage:
 - 2.1 For memberseconsumers three (3) to ten (10) years of age: two (2) hours per week. Service sessions shall not exceed one (1) hour per session. Maximum authorized utilizationsage shall not exceed twenty-four (24 ~~(twenty-four)~~) months.
 - 2.2 For memberseconsumers over ten (10) years of age: up to one (1) hour per week. Maximum authorized utilizationsage shall not exceed twelve (12 ~~(twelve)~~) months.

- 2.3 Any exception to the above outlined ~~utilizations~~ age must be approved by the Division's District Program Manager/designee.
- 2.4 When identified by the ~~planning~~ ISP team as an appropriate strategy, the ~~member~~ consumer may be seen in a joint session with other professionals.
3. This service is to be identified by the ~~planning~~ ISP team separately from other habilitation service needs and is expected to provide intensive services to increase and/or maintain targeted communication skills of the ~~member~~ consumer.

Rate Basis

1. Published. The published rate is based on one (1) hour of direct service.
2. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, *RateBook*, and/or other provider resources made available by the Division.

Direct Service Staff Qualifications

Direct service staff must have:

1. ~~Have A an Associates~~ Associate's degree in a related field and/or Assistive Technology Certification and/or Teacher's Aide Certification with two (2) years of experience in communication related activities such as sign language, assistive technology, augmentative communication with knowledge of behavior management and/or adaptive activities; five (5) years of experience as described above can be substituted for degree/certification certificate; or-
2. A Bachelor's or Master's degree in education, ~~or~~ therapy or -related field with specialty training in sign language, assistive technology, augmentative communication with knowledge of behavior management and/or adaptive activities; ~~or.~~
3. ~~A Masters degree in education or therapy or related field with specialty training in sign language, assistive technology, augmentative communication with knowledge of behavior management and/or adaptive activities.~~

Recordkeeping and Reporting Requirements

1. The Qualified Vendor shall submit the ~~teaching strategies~~ support plan that were developed for the member's habilitative outcomes -to the ~~member's S~~ support Ceoordinator for planning team review no later than ten (10) business days ~~following~~ after the initiation of service for a new or a continuing placement and whenever a new outcome has been identified for the member ~~for ISP team review~~.

2. The Qualified Vendor shall submit quarterly individualized progress reports on the member; ~~including a written summary describing the specific service activities and the performance data that identifies the consumer's progress toward achievement of the established objectives/outcomes, within thirty (30) days after the close of the quarter~~ to the member/consumer's Support Coordinator and the member/consumer/family/member/consumer's representative. The quarter is based on the member's annual planning cycle. The first quarterly progress report is due no later than the fifteenth (15th) day following the end of the quarter in which the service is initiated. Subsequent quarterly progress reports are due no later than the fifteenth (15th) day following the end of the quarter.
 - 2.1 At a minimum, the report shall include a written summary describing specific service activities, overall progress specific to planning document outcomes, performance data that identifies the member's progress toward achievement of the established outcomes, and current and potential barriers to achieving outcomes.
3. The Qualified Vendor ~~shall~~must maintain daily records on file as proof of the number of hours worked by ~~each~~their direct service staff providing direct service to members, e.g., staff time sheets.
 - 3.1 Each time sheet or equivalent document, or data system must must contain the original be signed or other independent verification of by the member/consumer/family/member/consumer's representative after service delivery as confirming verification of hours worked served. Proof of hours worked must be signed or verified by the member/member's representative before the Qualified Vendor submits the claim for payment.
4. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.